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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9700003475 (5)**1. Corporation Name

OFFICE FURNITURE DEPOT OF LAKELAND, INC.

Principal Place of Business

2833 HIGHWAY 92 EAST LAKELAND FL 33801 Mailing Address

2833 HIGHWAY 92 EAST LAKELAND FL 33801

FILED Apr 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/07/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 9128 P.O. Box 2766 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Laiceland ۴L 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year intangible 33806 24 25 U.S.A. Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MARTIN, E. SNOW 200 LAKE MORTON DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33801 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE Change BOLES, DAVID K NAME 1.2 NAME 2833 HIGHWAY 92 EAST STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL 33801 CITY-ST-ZIP 1.4 CITY-SI-ZIP TITLE DELETE Change Addition 2.1 TITLE **BOLES. JOANNE D** NAME 2.2 NAME 2833 HIGHWAY 92 EAST STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL 33801 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition DALTON, OSCAR D III NAME 3.2 NAME 2833 HIGHWAY 92 EAST STREET ADDRESS 3.3 STREET ADDRESS LAKELAND FL 33801 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with viis filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employee do to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attack ment with an address.